

Loss of self, function, connection and control: Understanding psychological distress in men with prostate cancer

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Background/Purpose: A minority of men with prostate cancer (PCa) report significant psychological distress several years post-diagnosis. Greater understanding of the contributing factors that impact on psychological distress is required to understand how such men could be better supported.

Methods: Men with prostate cancer diagnosed with PCa 18-42 months previously were recruited through a UK wide survey that included measures of psychological distress (K6, SWEMWBS). In-depth telephone interviews with 179 men were conducted. A sub-sample (n=26) were selected who scored above the 'caseness' cut-off on one or more psychological well-being measures. Framework analysis was used.

Results: Participants were aged 46-87 years; diagnosed with stage 1-4 PCa and 74% were partnered. Psychological distress in men with PCa centred around a theme of 'loss' towards *self* (identity, sexual/masculine, embodied, confidence), *function* (embodied, valued activities), *connection* (social, community, relational) and *control* (future, body and emotions, disease progression). Men's causal attributions or exacerbating factors for distress included; existing psychological or physical comorbidities, receiving hormonal treatment, being unpartnered and/or younger, personality traits, financial problems, negative illness perceptions or inadequacies in health care, such as a lack of emotional support by health professionals. Coping styles of emotional concealment, rumination, social withdrawal and help-seeking avoidance also appeared to contribute to ongoing distress.

Conclusions: Findings indicate ways that psychologically distressed men with PCa could be better supported by health care teams. Additional emotional support by PCa nurse specialists might be helpful. Further research could develop and test ways of screening and supporting such men.